

AMENDMENTS TO THE CLAIMS:

1. (Currently Amended) Apparatus for delivering inhalant to and monitoring exhaled fluid from a patient comprising:

a first cannula having a distal end adapted to be received at a first depth in, for delivering a fluid into, a nostril of the patient; and

a second cannula having a distal end adapted to be received at a second depth in, for sampling exhaled fluid from, the nostril,

wherein said first and second cannulae being disposed adjacent each other, and a predefined length of said first cannula being disposed substantially separate and independent from a predefined length of said adjacently disposed second cannula, such that upon insertion into the patient's nostril, said predefined lengths of each cannula being allowed to substantially separately and independently conform to internal contours of the patient's nostril and air passage, and said predefined lengths of each cannula being substantially separately and independently disposable in contact with the internal contours of the patient's nostril and air passage.

2. (Original) Apparatus of claim 1, wherein the first depth and second depth each range up to 3 cm.

3. (Original) Apparatus of claim 1, wherein the second depth equals or exceeds the first depth.

4. (Original) Apparatus of claim 1, further comprising a port adapted to promote fluid communication between a fluid supply and said first cannula.

5. (Original) Apparatus of claim 1, further comprising a port adapted to promote fluid communication between a fluid analyzer and said second cannula.

6. (Original) Apparatus of claim 1, wherein one or both of said distal end of said first cannula and said distal end of said second cannula have: an aperture, a perforated zone, a rounded contour, an anesthetic coating or combinations thereof.

7. (Original) Apparatus of claim 1, further comprising a moisture trap in fluid communication with said first cannula.

8. (Original) Apparatus of claim 1, further comprising a moisture trap in fluid communication with said second cannula.

9. (Withdrawn) Method of modifying an apparatus, comprising a first cannula connected for delivering fluid to a nasal cannula, and a second cannula connected to, for drawing fluid from, the nasal cannula, for delivering inhalant and monitoring exhaled fluid comprising:

disconnecting the nasal cannula from the first cannula, thereby defining a first truncated end;

disconnecting the nasal cannula from the second cannula, thereby defining a second truncated end; and

providing one or both of the first truncated end and the second truncated end with: an aperture, a perforated zone, a rounded contour, an anesthetic coating or combinations thereof.

10. (Withdrawn) Method of claim 9, wherein said providing comprises one or both of: connecting a third cannula to the first truncated end; and connecting a fourth cannula to the second truncated end; wherein distal ends of one or both of the third cannula and the fourth cannula have: an aperture, a perforated zone, a rounded contour, an anesthetic coating or combinations thereof.

11. (Currently Amended) Method of delivering inhalant to and monitoring exhaled fluid from a patient comprising:

inserting to a first depth a distal end of a first cannula in, for delivering a fluid into, a nostril of the patient; and

inserting to a second depth a distal end of a second cannula in, for sampling exhaled fluid from, the nostril,

wherein said first and second cannulae being disposed adjacent each other, and a predefined length of said first cannula being disposed substantially separate and independent from a predefined length of said adjacently disposed second cannula, such that upon insertion into the patient's nostril, said predefined lengths of each cannula being allowed to substantially separately and independently conform to internal contours of the patient's nostril and air passage, and said predefined lengths of each cannula being substantially separately and independently disposable in contact with the internal contours of the patient's nostril and air passage.

12. (Original) Method of claim 11, wherein the first depth and second depth range up to 3 cm.

13. (Original) Method of claim 11, wherein the second depth equals or exceeds the first depth.

14. (Original) Method of claim 11, further comprising, prior to one or both of said inserting to a first depth and said inserting to a second depth, providing one or both of the distal end of the first cannula and the distal end of the second cannula with: an aperture, a perforated zone, a rounded contour, an anesthetic coating or combinations thereof.